| UNITED STATES DEPARTMENT OF AGRICULTURE AGRICULTURAL RESEARCH SERVICE | TYPE OF RESEARCH AGREEMENT | | |
|--|--|---------------------------------------|--|
| RESEARCH AGREEMENT | AGREEMENT NO. | TYPE OF ACTION | |
| TITLE OF PROJECT | PERIOD OF AGREEMENT | PERIOD OF AGREEMENT | |
| | FEDERAL OBLIGATION | thru CHANGE IN FEDERAL OBLIGATION + | |
| AGENCY (Name and Address) | CRIS NO. | AUTHORITY | |
| | OBLIGA | OBLIGATION DISTRIBUTION | |
| | Accounting Code | Amount | |
| AUTHORIZED DEPT. OFFICER'S DESIGNATED REPRESENTATIVE (Name a | and Address) COOPERATOR (Name and Address) | (| |
| ARS FINANCE OFFICE (Complete Mailing Address) | COOPERATOR'S DESIGNATED REPR | DESENITATIVE (Name and Address) | |
| | | | |
| This Agreement includes the following: BASIS FOR AWARD & METHOD OF PAYMENT Output of Mind of the second of the s | | | |
| Statement of Work; or Project Summary; or Proposal; and Budget (Form ARS-454/455) USDA Civil Rights Poster - "And Justice for All") Form AD-457A): and Provisions General (Form ARS-452) Special (Form ARS-453) 7 CFR 3015. Subpart U (by reference) 37 CFR 3015. T751b.). Copyrights (by reference) Appendix A - Certification Regarding Debarment, Suspension and other Responsibility Matters - Primary Covered Transactions (AD-1047) Appendix B - Certification Regarding Debarment, Suspension and other Responsibility Matters - Lower Tier Covered Transactions (AD-1048) Appendix C - Certification Regarding Drug-Free Workplace Requirements - Non-Individuals (AD-1049) Appendix D - Certification Regarding Drug-Free Workplace Requirements - Individuals (AD-1050) Appendix D - Certification Regarding Drug-Free Workplace Requirements - Individuals (AD-1050) Appendix D - Certification Regarding Drug-Free Workplace Requirements - Individuals (AD-1050) Appendix D - Certification Regarding Drug-Free Workplace Requirements - Individuals (AD-1050) Appendix D - Certification Regarding Drug-Free Workplace Requirements only) Other (Specify) ADODR Instructions | | | |
| Complete Certification on Reverse To: ADODR Cooperating Organization | | | |
| FOR THE UNITED STATES DEPARTMENT OF AGRICULTURE | | | |
| | TYPED NAME | DATE | |
| FOR THE PERFORMING ORGANIZATION | | | |
| (Signature of person authorized by the governing AUTHORIZED DEPARTMENTAL OFFICER | ng body of the performing organization to incl TYPED NAME | DATE | |
| AUTHORIZED DEPARTMENTAL OFFICER | TYPED NAME | DATE | |